

POS000113559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

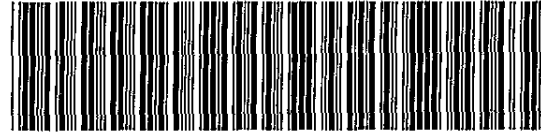
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900057997149

08/16/05--01039--020 \*\*87.50

FILED

05 AUG 16 PM 1:58

STATE DEPT OF JUNE  
TALLAHASSEE, FLORIDA

RECEIVED

05 AUG 16 PM 1:46

STATE DEPT OF JUNE  
TALLAHASSEE, FLORIDA

T. Hampton AUG 16 2005

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: \_\_\_\_\_

J & J Community Improvement, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☒ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: \_\_\_\_\_

Jay Jackson  
Name (Printed or typed)

717 Carver St. A  
Address

Tallahassee, FL 32310  
City, State & Zip

860-980-2753  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

J & J Community Improvement, Inc.

05 AUG 16 PM 1:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

717 Carver St. A  
Tallahassee, FL 32310

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and All Legal and Lawful business

**ARTICLE IV SHARES**

The number of shares of stock is:

20

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Jay Jackson 717 Carver St & Tall., FL 32310 CEO

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Jay Jackson 717 Carver St A Tallahassee, FL 32310

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

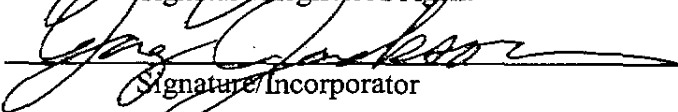
Jay Jackson 717 Carver St A Tallahassee, FL 32310

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

8/16/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8/16/05  
\_\_\_\_\_  
Date